



Auto Salvage Shield Insurance Program Supplemental Application

Insured/Applicant Section

Insured/Applicant Name	
Address	
Phone Number	
Fax Number	
FEIN	
Contact Name	
Contact Title	
Email Address	
Web Site	
Estimated Annual Sales	
Number of Employees	
Year Business Established	

The following information should be included with the submission:

- Current property schedule with values and description of building occupancy
- Current driver's list including family member and permissive users
- Recently valued loss runs for current and four previous years

General Questions		Check Yes/No Answer																			
		Yes	No																		
1	Please provide percentages of total sales: <table border="1" style="width: 100%; margin-top: 10px; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%; text-align: left;">Operation</th> <th style="width: 70%; text-align: left;">Percentage</th> </tr> </thead> <tbody> <tr><td>Used Part Sales</td><td></td></tr> <tr><td>New Part Sales</td><td></td></tr> <tr><td>Mechanical Repair</td><td></td></tr> <tr><td>Auto Body Work</td><td></td></tr> <tr><td>Towing for Others</td><td></td></tr> <tr><td>Scrap Metal Recycling</td><td></td></tr> <tr><td>Off-site Car Crushing</td><td></td></tr> <tr><td>Other</td><td></td></tr> </tbody> </table>	Operation	Percentage	Used Part Sales		New Part Sales		Mechanical Repair		Auto Body Work		Towing for Others		Scrap Metal Recycling		Off-site Car Crushing		Other		Fill-in applicable percentage(s) in table	
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2	Are you an ARA Certified Automotive Recycler?																				
	If so, Are you R2 Certified?																				
	Are you a PRP(Preferred Recycled Parts) Facility?																				

General Questions, continued		Check Yes/No Answer	
		Yes	No
3	How are your parts sold? Provide percentages:		Fill-in applicable percentage(s) in table
	Category	Percentage	
	Showroom/Counter		
	Drop Shipped		
	Brokerage		
	U-Pull It		
	Other		
4	Do you operate a U-Pull-it Operation? If yes answer below		
	Average # of visitors per day? _____ Is there a maximum # allowed?		
	Do you stack vehicles? If so how high?		
	Are customers allowed in area where vehicles are stacked?		
	Are vehicles on stands or rims?		
	Describe rack stacking systems.		
	Do you charge a fee to enter the U-Pull-it area		
	Is there a liability waiver signed by the customer?		
	How long is the waiver stored?		
	Do you offer any warranties?		
	Is area supervised by an employee?		
	What is the minimum age to enter?		
	Are pets allowed?		
	Are there footwear restrictions in this area?		
	Are safety rules posted prominently?		
	Are rules posted banning alcohol and firearms?		
	Are customers allowed to use torches, hand operated jacks, or compressors?		
Do you provide hand tools for customer use?			
Are employee only signs displayed prominently in restricted areas?			
Is yard under video surveillance?			
5	Do you sell used autos?		
	If yes, what is the percentage of your total revenue from used car sales?		
	Are cars sold on an "as is" basis"?		
	Do you have dealer plates? How many?		
	Do you sell used auto parts?		
	If yes, what is the percentage of your total revenue from used parts?		
Are used parts sold on an "as is" basis?			
6.	Do you tow vehicles for others?		
	If yes, what is the percentage of the total revenue from towing?		
	Do you offer towing assistance 24 hours?		
	Are you on a rotation (AAA, Municipalities, etc.)?		
7.	Is there a security system on site?		Fill-in security system details in table
	If yes, please advise:		
	Central monitored		
	Local alarm/gong		
	Surveillance Cameras		
	Motion Detection		
Fence Alarm			

General Questions, continued		Check Yes/No Answer	
		Yes	No
8.	Are there dogs on premises?		
	If yes, are they able to roam freely?		
9.	Are there security guards on premises?		
	If yes, are they armed?		
	If the guards are employees of a 3 rd party, are Certificates of Insurance obtained, including hold harmless agreement in favor of the insured?		
10.	Do you have a formal safety plan?		
11.	Do you have signed contracts with vendors removing waste materials? (i.e. batteries, waste water, waste oil, tires, etc.)		
12.	Do you have Environmental Impairment Liability?		
13.	Are there "No Trespassing" signs around the yard?		
14.	Are there any Additional Named Insureds being requested? If yes:		
	a. Provide Name, address and FEIN		
	b. What is their relationship to the Named Insured?		
	c. Is there common ownership?		
Automobile		Check Yes/No Answer	
		Yes	No
1	Do you comply with US DOT and state specific safety standards?		
2	Describe your procedure for hiring drivers:		
3	Describe your training procedures for new drivers:		
4	Do you pull MVRs for all drivers?		
	If yes, how often:		
5	What are your MVR guidelines?		
6	What action is taken on a questionable/unacceptable MVR?		
7	Do all commercial drivers have CDLS?		
	Are CDL drivers' medical certificates updated annually?		
	Are CDL drivers drug tested annually?		
Automobile, continued		Check Yes/No Answer	

		Yes	No
8	What is the typical radius of operation of commercial vehicles?		
	0 to 50 miles		
	51 to 200 miles		
	201 miles or greater		
9.	Do you conduct Post-Accident investigations?		
10.	Are loads properly secured with straps and/or chains after loading prior to departing?		
11.	What is your policy regarding driver's cell phone use?		
12.	Describe vehicle maintenance program.		
	Are mechanics certified?		
13.	Are Federal or State Filings required?		
	a. What filing(s)?		
	b. For what reason?		
14.	How many Drivers?		
	How many power units?		
15.	Do you haul for others?		
	If yes, what do you haul and how often?		
16.	Do others haul for you?		
	If yes: a) How often?		
	b) Do you obtain Certificates of Insurance from those carriers?		

Property		Check Yes/No Answer	
		Yes	No
1	Are all gases and fuels stored in approved containers away from open flames and sources of heat?		
2	If a paint spray booth is used, is it UL certified and properly vented?		
3	Are tires from scrapped autos stored on premises?		
	Is there regular pick up of tires by a 3 rd party?		
	At what intervals?		
4	Are batteries palletized and hauled away by an outside contractor?		
	If yes, at what intervals?		
	If not, explain:		
5	Is there a process for handling waste fluids (FRS)?		
6	Are any buildings on the schedule or on the premises unoccupied or vacant?		

Inland Marine/Equipment	Check Yes/No Answer
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		Yes	No
1	Do you operate any mobile equipment?		
2	Do you conduct regular Equipment Maintenance as follows?		
	a) Weekly checks for proper lubrication?		
	b) Maintenance contracts with outside vendor(s)?		
	c) Do you obtain Certificates of insurance from Maintenance vendors?		
3.	Do you require verification of training or provide training for equipment operators?		
	If so, please describe.		
4.	Do you have a shredder? If yes,		
	a) What is the rotor or box size?		
	b) What HP?		
	c) What is the power source?		
5.	Do you have any permanently installed equipment?		

Worker's Compensation		Check Yes/No Answer	
		Yes	No
1	Is there a formal employee safety plan/manual?		
2	Do you conduct safety meetings?		
	How often?		
3.	Do you offer light duty return to work?		
4.	Are dismantling areas equipped with at least one emergency hand and eye washing station?		
5.	Lockout/Tagout when equipment is being cleaned, repaired or services?		
6.	Are hoists well maintained and procedures in place to prevent vehicles from falling?		
7.	Are safety measures in place while the crusher is in operation to prevent an employee from falling or being pulled into the machine?		
8.	Have there been any OSHA violations in the past 36 months?		
	a. If so, please provide details.		

Insured/Applicant Signature:	Date:

For questions contact:

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